02/15/2008 12:07

Image# 28990468328

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORIWI 3X	For Othe	er Than An	Authorize	d Committe	ee		Office Use Only	у
NAME OF COMMITTEE (in full)		MAILING LAI OR PRINT		ample:If typing er the lines	, type			
American Council of Life Ins	surers Politic	al Action Com	mittee					
ADDRESS (number and street)		nstitution Ave.	, <b>NW</b>					
Check if different	Suite 70	J0 						
than previously reported. (ACC)	Washir	ngton				DC	20001	
2. FEC IDENTIFICATION NU	MBER 🖫	·	CITY 🛋			STATEA	ZIPC	ODE 🛕
C00147066			3. IS THIS REPORT		NEW N) <b>OR</b>		AMENDED A)	
4. <b>TYPE OF REPORT</b> (Choose One)		eport \	Feb 20 (M2	) [	May 20 (M5)	Au	ig 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Di	ue On:	Mar 20 (M3	) [ .	Jun 20 (M6)	Se	ep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15			Apr 20 (M4	) .	Jul 20 (M7)	Oc	et 20 (M10)	Jan 31 (YE)
Quarterly Report(	(c)	12-Day <b>PRE</b> -Election		Primary (12P)		General (12G) Runoff (12R		
Quarterly Report(0 October 15 Quarterly Report(0		Report for t		Convention (	12C)	Special	(12G)	
January 31 Quarterly Report(		I	Election on				in the State	
July 31 Mid-Year Report(Non-electi Year Only) (MY)	on (d)	(d) 30-Day Post -Election		( )		Runoff	(30R)	Special (30S)
Termination Repo (TER)	rt	Report for t	ne: Election on				in the State	
5. Covering Period 0	1 0 1	200	8	through	0 1	3 1	2008	
I certify that I have examined this	Report and	to the best of r	ny knowledge	and belief it is	true, correct	and complete	<del>.</del>	
Type or Print Name of Treasurer	Mr. Do	onald L. Walke	r					
Signature of Treasurer Ele <u>ctr</u>	onically Filed	by Mr. Don	ald L. Walker		D	ate 0.2	2 15	2008
NOTE : Submission of false, erro	oneous, or in	complete infor	mation may s	ubject the pers	on signing thi	s Report to th	ne penalties of 2 l	U.S.C 437g.
Office Use							FEC FO	RM 3X

FE6AN026

## SUMMARY PAGE OF RECEIPTS AND DISRURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS

Page 2

R		01 01 2008	To: 0 1 3 1 2 0 0 8
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1		24247.34
	(b) Cash on Hand at Begining of Reporting Period	24247.34	
	(c) Total Receipts (from Line 19)	21989.08	21989.08
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46236.42	46236.42
7.	Total Disbursements (from Line 31)	28500.00	28500.00
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17736.42	17736.42
).	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

0 1 3<sup>D</sup>1 м N 0 1 2008 м м 0 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 6366.87 6366.87 (i) Itemized (use Schedule A) .......... 3622.21 3622.21 (ii) Unitemized ..... (iii) TOTAL (add 9989.08 9989.08 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 7000.00 7000.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 16989.08 16989.08 Totals to Line 33, page 5) ...... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 5000.00 5000.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 21989.08 21989.08 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts

21989.08

21989.08

(subtract Line 18(c) from Line 19) .....

### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Transfers to Affiliated/Other Party Committees	0.00	0.00
:3.	Contributions to Federal Candidates/Committees and Other Political Committees	28500.00	28500.00
	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
:6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	28500.00	28500.00
2.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	28500.00	28500.00

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	16989.08	16989.08
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	16989.08	16989.08
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 14 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than usin	and Statements may not be sold or used by any persign the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
American Council of Life Insurers	Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Thomas J. McInerney		Date of Receipt
Mailing Address 4 Brook Ridge		01 09 2008
City	State Zip Code	Transaction ID: 23040427
West Simsbury	CT 06092-2822	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer ING Financial Services	Occupation Chief Executive Officer, U.S. Finance	sia
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr Randall H Talbot		Date of Receipt
Mailing Address 3421 Evergreet PT	r. RD	M M / D D / Y Y Y Y Y O D D / 2008
City	State Zip Code	Transaction ID: 23053017
Medina	WA 98039-1022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Symetra Financial Corpora- tion	Occupation President & Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr George C Pagos		Date of Receipt
Mailing Address 4216 Whitman Av	e North	01 16 2008
City	State Zip Code	Transaction ID: 23095462
Seattle	WA 98103-7323	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Symetra Life Insurance Co- mpany	Occupation VP & General Counsel	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	2250.00

TOTAL This Period (last page this line number only) .....

	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 14 (check only one)    X
or for commerc	n copied from such Reports and S ial purposes, other than using the COMMITTEE (In Full) Council of Life Insurers Poli	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Last, First, Middle Initial)			Date of Receipt
Mailing Add	ress 16225 NE 112th CT			01 17 2008
City <u>Redmond</u>		State WA	Zip Code 98052-2772	Transaction ID: 23109961
FEC ID nun	nber of contributing cal committee.	C	90032-2112	Amount of Each Receipt this Period  500.00
tion	nployer nancial Corpora-	Occupatio Manager		
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 500.00	
Mr. Robert A	Last, First, Middle Initial) . Mucci ress 6226 Fredericksburg L	ano		Date of Receipt
	1655 6226 FrederickSburg L	.ane		01 24 2008
City		State	Zip Code	Transaction ID: 23249449
	nber of contributing cal committee.	C	53718-8268	Amount of Each Receipt this Period 500.00
surance Co			P & Treasurer	
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 500.00	
Full Name (	Last, First, Middle Initial) Vi Marra			Date of Receipt
Mailing Add	ress 7 Cobtail Way			0 1 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 23253991
Simsbury		CT	06070-2530	Amount of Each Receipt this Period
	nber of contributing cal committee.	C		1000.00
Name of En Hartford Life			t & Chief Operating Officer	
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL	f Receipts This Page (optional)	1		2000.00

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 14 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the commercial purposes.	I Statements may not be sold or used by any pe he name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Council of Life Insurers Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) Mr. Walter C. Welsh		Date of Receipt
Mailing Address 101 Constitution Ave 101 Constitution Ave	, NW	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR1550105912612
Washington	DC 20001-2140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	338.54
Name of Employer American Council of Life Insurers	Occupation Executive Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$169.27 Se-
Other (specify) ▼	338.54	mi-Monthly)
Full Name (Last, First, Middle Initial) Mr. Gary E. Hughes	•	Date of Receipt
Mailing Address 101 Constitution Ave Suite 700 West	enue, NW	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR771358212612
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	281.17
Name of Employer American Council of Life Insurers	Occupation Executive Vice Pres & General Cou	inse
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$140.58 Se-
Other (specify)	281.17	mi-Monthly)
Full Name (Last, First, Middle Initial) Mr. J. Bruce Ferguson	1	Date of Receipt
Mailing Address 101 Constitution Ave Suite 700 West	enue, NW	M " M / D " D / Y " Y " Y " Y
City	State Zip Code	Transaction ID: PR771373212612
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	247.18
Name of Employer American Council of Life Insurers	Occupation Senior Vice President, State Relation	ons
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$123.59 Se-
Other (specify) ▼	247.18	mi-Monthly)
SUPPOTAL of Possints This Page (entional)		866.89

## SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 14 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Council of Life Insurers Po	ne name and ad	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Council of Life insurers Fo	milical Action	Committee	
_	Full Name (Last, First, Middle Initial) Ms. Kimberly Dorgan			Date of Receipt
	Mailing Address 101 Constitution Ave Suite 700 West	nue, NW		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR771395112612
	Washington	DC	20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		416.66
	Name of Employer American Council of Life Insurers		e Vice President, Federal Rel	<u>-</u> a
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 416.66	P/R Deduction (\$208.33 Semi-Monthly)
	Full Name (Last, First, Middle Initial) Frank Keating			Date of Receipt
	Mailing Address 101 Constitution Ave Suite 700 West			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR771419712612
	Washington	DC	20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		416.66
	Name of Employer American Council of Life Insurers	Occupation Presiden		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	416.66	P/R Deduction (\$208.33 Semi-Monthly)
	Full Name (Last, First, Middle Initial) Mr. Michael J. Hunter			Date of Receipt
	Mailing Address 101 Constitution Ave Suite 700 West	nue, NW		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR771419812612
	Washington	DC	20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		416.66
	Name of Employer American Council of Life Insurers		e Vice President & COO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 416.66	P/R Deduction (\$208.33 Semi-Monthly)
	SUBTOTAL of Receipts This Page (optional)	1		1249.98
8	ODICIAL OF RECEIPES THIS FAGE (ODEIOHAI)			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Council of Life Insurers Pole	Statements ma ne name and ad	dress of any political committee to	FOR LINE NUMBER: PAGE 10 / 14 (check only one)  11a 11b X 11c 12 13 14 15 16 17  son for the purpose of soliciting contributions to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Northwestern Mutual Life PAC  Mailing Address 720 E. Wisconsin Ave	e.		Date of Receipt  O 1
	City	State	Zip Code	Transaction ID: 23249436
	Milwaukee	WI	53202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		0197095	5000.00
	Name of Employer	Occupatio	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
В.	Full Name (Last, First, Middle Initial) Ameriprise Financial PAC			Date of Receipt
	Mailing Address 101 Constitution Ave Suite 816 W	NW		01 24 2008
	City	State	Zip Code	Transaction ID: 23249437
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C0	0414474	2000.00
	Name of Employer	Occupatio	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	•	7000.00
TOTAL This Period (last page this line number only)	<u> </u>	7000.00

A.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 14 (check only one)  11a 11b 11c 12 12 13 14 15 X 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)  American Council of Life Insurers Polit	tical Action Committee	_
Full Name (Last, First, Middle Initial) South Dakota First PAC		Date of Receipt
Mailing Address 122 Maryland Ave, NE		01 31 7 2008
City	State Zip Code	Transaction ID: 23381070
Washington	DC 20002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00430371	5000.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	ACLI PAC Check intended for 2006, not received by cmte until 2007, so was refunded

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	5000.00
TOTAL This Period (last page this line number only)	<b>•</b>	5000.00

Detailed Summary Page	CHEDULE B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: (check only one)	PAGE 12/14
NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee  Full Name (Last, First, Middle Initial) CHRIS PAC  Mailing Address 227 Massachusetts Ave, NE Suite 101  Calegory/ Primary General Primary General Disbursement  Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Office Sought: Full Name (Last, First, Middle Initial) Nike Crapo for US Senate Disbursement  Candidate Name  Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial) Nike Crapo for US Senate Disbursement  Candidate Name Nichael Crapo Office Sought:  Full Name (Last, First, Middle Initial) Nike Crapo for US Senate  Mailing Address PO Box 1948  City Disbursement Candidate Name Nichael Crapo Office Sought:  Full Name (Last, First, Middle Initial) Nike Crapo for US Senate  Mailing Address PO Box 1948  Transaction ID: 23255948 Date of Disbursement  Other (specify) ▼  Transaction ID: 23255948  Date of Disbursement  Other (specify) ▼  Transaction ID: 23255948  Date of Disbursement  Other (specify) ▼  Transaction ID: 23255948  Date of Disbursement Initial Period Category/ Type  Transaction ID: 23255948  Date of Disbursement  Other (specify) ▼  Transaction ID: 23255948  Date of Disbursement Initial Period Disbursement For:  Other (specify) ▼  Transaction ID: 23255948  Date of Disbursement Initial Period Disbursement For:  Other (specify) ▼  Transaction ID: 23255949  Date of Disbursement This Period Disbursement For:  Other (specify) ▼		Detailed Summary Page	27 28a 28b 2	8c 29
NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee  Full Name (Last, First, Middle Initial) CHRIS PAC  Malling Address 227 Massachusetts Ave, NE Suite 101  City State Zip Code Washington DC 20002  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General District: Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Malling Address PO Box 1948  City State: ID District: Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Malling Address PO Box 1948  City State: ID District: Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Malling Address PO Box 1948  City State: ID District: Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Malling Address PO Box 1948  City State: ID District: Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Malling Address PO Box 1948  City Senate President State: ID District: Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Malling Address PO Box 1948  City State: Zip Code ID 83701  Purpose of Disbursement  Candidate Name Mike Crapo for US Senate  Malling Address PO Box 1948  City State: Zip Code ID 83701  Purpose of Disbursement  Office Sought: House X Primary General Other (specify) ▼  Transaction ID: 23255942  Amount of Each Disbursement this Period Name of Disbursement For: 2010  Category' Type  Office Sought: House X Senate President Office (Sought: Type)  Office Sought: House X Senate President Office (Sought: Type)  Office Sought: House X Senate President Office (Sought: Type)				
CHRIS PAC  Mailing Address 227 Massachusetts Ave, NE Suite 101  City State Zip Code Purpose of Disbursement  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Milling Address PO Box 1948  City Sonate President State: Disbursement  Candidate Name  Milling Address PO Box 1948  City Senate President State: Disbursement For: 2010 X Senate President State: District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Mailing Address PO Box 1948  City State Zip Code ID 83701  Candidate Name Michael Crapo  Office Sought: House President State: ID District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Mailing Address PO Box 1948  City State Zip Code ID 83701  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Mailing Address PO Box 1948  City Senate President State Zip Code ID 83701  Cardidate Name Michael Crapo  Office Sought: House ID 83701  Cardidate Name Michael Crapo  Office Sought: House ID Subursement For: 2010 Amount of Each Disbursement this Period Table President Santa S	NAME OF COMMITTEE (In Full)			
Admiling Address Suite 101  City State Zip Code Washington DC 20002  Purpose of Disbursement  Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate President State: ID District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate President State: ID District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Office Sought: V Senate President State: ID District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Office Sought: V Senate President State: ID District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Mailing Address PO Box 1948  City Senate President State: ID District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Mailing Address PO Box 1948  City State Zip Code ID 83701  Transaction ID: 23255949  Date of Disbursement Office Sought: V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	* * * * * * * * * * * * * * * * * * * *			
Washington Purpose of Disbursement Candidate Name  Office Sought:    House		, NE	01 25	2008
Candidate Name  Office Sought: House Senate Prisadent State: District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Mailing Address PO Box 1948  City Solution Boise ID Bisbursement For: 2010 X Primary General Disbursement Wichael Crapo  Office Sought: House X Senate Prisadent State: District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate ID 83701  Candidate Name Michael Crapo  Office Sought: House X Senate Prisadent State: ID District:  Full Name (Last, First, Middle Initial) Mike Crapo for US Senate  Mailing Address PO Box 1948  City Senate President  Mailing Address PO Box 1948  City Senate ID 83701  Purpose of Disbursement  Candidate Name Michael Crapo  Office Sought: House ID 83701  Category' Type  Office Sought: House ID 83701  Purpose of Disbursement  Candidate Name Michael Crapo  Office Sought: House X Senate President Primary X General Category' Type  Office Sought: House X Senate Primary X General Category' Type  Office Sought: Other (specify) ▼			Amount of Each Disbu	
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